PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09764618

CLAIMS AS FILED - PART I (Column 1)						mm (2)		SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			21		(Colu	1111 2)				OR	·	
			02					RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			थ्र minus 20=		•			X\$ 9=	9	OR	X\$18=	
INDEPENDENT CLAIMS			\ minus 3 =		<u> </u>			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=	
* If the difference in column 1 is less than zero, enter					r "0" in c	olumn 2		TOTAL	364	OR	TOTAL	
	C	LAIMS AS A	MENDED	- PAR	T II				•		OTHER	THAN
(Column 1) (Colum						(Column 3)	_	SMALLE	NTITY	OR	SMALL	NTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	.31	Minus	-31	<i>'</i>	= /		X\$ 9=	ſ	OR	X\$18=	
	Independent	• 6 NTATION OF MI	Minus (" 6	COLAULA	= /] [X40=		OR	X80=	
	LIHOI PHESE	NIATION OF MI	JUITLE DEF	ENUEN	CLAIM		ا ا	+135=		OR	+270=	
								TOTAL	-	ÓR	TOTAL ADDIT. FEE	
			ADDIT. FEE	-	ι.	ADDII. FEE						
AMENDMENT 8		(Column 1) CLAIMS	: : :	(Colui	EST	(Column 3)	1 1		ADDI-			ADDI-
		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	•	Minus	**		=	╽╽	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	**1		=] [X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				CLAIM		J		-			
								+135=		OR	.+270=	
								TOTAL ODIT. FEE		QA	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)			• /			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***	11.11.1	± ,]	X40=		•	X80=	
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM] -		{	OR		
	tt ab		+135=		OR	+270=						
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." 							. A	TOTAL DDIT, FEE		OR	TOTAL ADDIT, FEE	
		mber Previously Pa aber Previously Pa						_	ropriate box	in col	umn 1.	